



2005 Assistance for Business Clinics

Presentations from the following agencies:

Clinic Schedule:

Registration

7:45 to 8:10

Opening Remarks

8:10 to 8:15

Agency Presentations

(a) 8:15- 11:45 & 12:30- 4:30

or

(b) 8:15- 11:55 & 12:50- 4:30

Dept. of Labor & Industry

Wage & Hour

Human Rights

Unemployment Insurance Benefits

Unemployment Insurance Tax

Job Service

- Employer Tax Credits
- Customized Human Resource Asst.

Dept. of Revenue

- Withholding Tax

The clinics are geared to new and established employer/business owners to give valuable up-to-date information regarding tax rules & laws (withholding & reporting), tax credits, personnel issues and services available at your local Workforce Centers.

2005 Schedule

<u>City</u>	<u>Date</u>	<u>Location</u>	<u>Sponsor</u>	<u>Fee</u>
(a) Livingston	April 27	Yellowstone Inn	Job Service	\$30
(b) Billings	April 28	MSU Downtown Campus	MSU- Billings	\$40
(b) Kalispell	May 10	Outlaw Hotel	Chamber of Commerce	\$40
(a) T. Falls	May 11	Senior Citizens Cntr.	Chamber of Commerce	\$30
(a) Helena	May 25	Red Lion Colonial	Chamber of Commerce	\$35/45*
(a) Dillon	June 7	U of M Western	JSEC/CMT/U of M	\$30
(b) Bozeman	June 8	Holiday Inn	Chamber of Commerce	\$35/50*
(a) Wolf Point	June 21	Silver Wolf Casino	Chamber of Commerce	\$25
(a) Glendive	June 22	Eastern Plains Event Cntr.	Chamber/Agriculture	\$25/35*
(a) Miles City	June 23	Dept. Fish Wildlife & Pks.	Chamber of Commerce	\$30
(a) Butte	September 13	Red Lion Hotel	Chamber of Commerce	\$30
(a) Lewistown	September 21	Yogo Inn	JSEC/Lewistown Chamber	\$25/20**
(b) Great Falls	September 22	Town House Inn	Chamber of Commerce	\$35/45*
(a) Havre	October 4	Great Northern Best West	Chamber of Commerce	\$25
(a) Cut Bank	October 5	Glacier Electric	JSEC/Cut Bank Chamber	\$30
(b) Missoula	October 18	Best Inn & Conf. Cntr.	Chamber of Commerce	\$35/45*
(a) Hamilton	October 19	Bitterroot River Inn	Chamber of Commerce	\$35/40*

Registration fees are set by the local sponsor to cover facility costs, including lunch. For more information or to register, please contact your local sponsor. Enrollment may be limited, so please respond as soon as possible. Send your registration form and check payable to your local sponsor at least two weeks prior to the clinic. Sponsor addresses are listed on the back. *Higher prices indicated are for participants that are not current chamber members and ** are for 2 or more attending participants.

Registration Form - Assistance for Business Clinics

Name of Business _____ Phone Number _____

Address _____ Town/Zip _____

& Name(s) of those attending _____

**Check if needing CPE ☐ (2005 - ONLY 6 HRS. OF CREDIT AVAILABLE) or CLE ☐ credits.

**Special Accommodations Needed (check here) ☐